

Attorney Docket No.: PMP-05-1337CIP

In re Application of James P. Mulhern et a.

Serial No.:

10/613,669

Filed:

July 2, 2003

For:

REAR WHEEL DRIVE POWER WHEELCHAIR WITH GROUND-CONTACTING

ANTI-TIP WHEELS

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- \_ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.
- A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.
- \_ No additional fee is required.

The fee has been calculated as shown below:

(Col. 1)

(Col. 2) (Col. 3)

SMALL ENTITY

OTHER THAN SMALL ENTITY

|  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |   | HIGHEST<br>NO. PRE-<br>VIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |  |
|--|---|---|--|------------------|--|
| TOTAL  | 24  | _ | ** 30=                                     | 0                |  |
| INDEP.   | *5  | - | ** 4=                                      | 1                |  |
| Application Size Fee                           |   |   |  |                  |  |
| First Presentation of Multiple Dependent Claim |   |   |  |                  |  |

| RATE    | ADD'L<br>FEE | OR |
|---------|--------------|----|
| x 25 =  | \$           |    |
| X 100 = | \$           |    |
|         | \$           |    |
| +180=   | \$           |    |

| RATE    | ADD'L<br>FEE |
|---------|--------------|
| x50 =   | \$           |
| x 200 = | \$200.00     |
| x250=   | \$           |
| +360=   | \$           |

TOTAL ADDITIONAL FEE

OR.

\$200.00

- \* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- \*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- \*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- Please charge my Deposit Account No. 50-2719 in the amount of \$\_\_\_\_\_. A duplicate copy of this sheet is enclosed.
- x A check in the amount of \$200.00 is attached.
- The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.
  - $\underline{x}$  Any filing fees under 37 CFR §1.16 for the presentation of extra claims.
  - <u>x</u> Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.

Respectfully submitted,

Thomas J. Durling Reg. No. 31,349

Attorney for Applicants

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**PATENT** 

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit

: 3618

CUSTOMER NO. 35811

Examiner

: Kelly E. Campbell

Docket No.: PMP-05-1337CIP

Serial No. Filed

Title

: 10/613,669 : July 2, 2003

Inventors

: James P. Mulhern, et al

: REAR WHEEL DRIVE POWER

: WHEELCHAIR WITH GROUND-

CONTACTING ANTI-TIP WHEELS

Dated: January 23, 2006

Confirmation No.: 7265

## **RESPONSE TO FIRST OFFICE ACTION**

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

This is in response to the Office Action dated July 22, 2005. A three month shortened statutory response period was set by the action. This response is being filed within the third month after this due date. A request for a three-month extension of time and the appropriate fee accompany this response. This extension resets the deadline to January 23, 2006 (January 22 being a Sunday).

Amendments to the Claims are reflected in the listing of claims, which begin on page 2 of this paper. Remarks/Arguments begin on page 8 of this paper.

A check covering the extension fee (\$1020) and the fee for one additional independent claim (\$200) is included herewith. Charge any additional fee associated with this response, and credit any overpayment, to deposit account 50-2719.

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